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BPV Case ID Affix BPV Case ID Barcode Label Tissue Bank ID:		Form Completed By:		
Lung Slide Pathology Review				
1. Slide ID examined by pathologist:				
2. Parent specimen ID of the sample from which this slide was derived:				
3. Organ of origin:	Select One: O Lung O Other (specify) Specify other organ of orig	in:		vas selected, specify an of origin:

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	1		
4. Histologic type:	Select All That Apply		
If Other was salested reserve		of lung, acinar (WHO code: 8550/3)	
If Other was selected, record	O Adenocarcinoma of lung, bronchioalveolar (WHO code: 8250/2)		
other histologic type:	O Adenocarcinoma of lung, bronchioalveolar, mixed nonmucinous and mucino		
	or indeterminate (WHO code: 8254/3)		
		of lung, bronchioalveolar, mucinous (WHO code: 8253/3)	
		of lung, bronchioalveolar, nonmucinous (WHO code: 8252/3)	
		of lung, clear cell (WHO code: 8210/3)	
	O Adenocarcinoma		
		of lung, mixed subtype (specify) (WHO code: 8333/3)	
	Specify types and %	:	
	O Adenocarcinoma	of lung, mucinous (colloidal) (WHO code: 8480/3)	
		of lung, mucinous cystadenocarcinoma (WHO code: 8470/3)	
		of lung, papillary (WHO code: 8260/3)	
		of lung, signet ring (WHO code: 8490/3)	
		of lung, solid with mucin production (WHO code: 8230/3)	
		rcinoma (WHO code: 8070/3)	
	•	variant of squamous cell carcinoma (WHO code: 8052/3)	
		variant of squamous cell carcinoma (WHO code: 8084/3)	
		variant of squamous cell carcinoma (WHO code: 8073/3)	
		variant of squamous cell carcinoma (WHO code: 8083/3)	
	O Other (specify)		
	Specify other histolo	ogic type:	

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5. Greatest tumor dimension on slide:	(mm)	
6. Percent of cross-sectional surface area of entire slide composed of tumor focus (includes necrotic tumor):	%	
7. Percent of tumor nuclei by cell count of the entire slide (number of tumor epithelial cell nuclei as compared to all cell nuclei):	%	
8. Percent of cross-sectional surface area of entire slide composed of necrotic tissue:	%	

Note: BPV case acceptance criteria require necrosis percentage of <20% of the entire slide AND tumor content of ≥50% tumor nuclei.



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Histologic Profile Quantitative Assessment of Tumor Should Total 100%				
9. Histologic profile quantitative	Percent viable tumor by surface area (not including stroma)	%		
assessment:	Percent necrotic tumor by surface area			
	Percent tumor stroma by surface area			
	Percent non-cellular component by surface area (i.e., mucin, hemorrhage, blood clot, etc.)			
	If present, describe non-cellular component:			
	Histologic profile total % (should equal 100%)			
10. Histologic grade (AJCC 7th edition):	Select One: O G1: Well differentiated O G2: Moderately differentiated O G3: Poorly differentiated O G4: Undifferentiated O GX: Cannot be assessed			



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Tumor Staging per AJCC 7th Edition			
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11. pT: Pathologic spread primary tumor (AJCC 7th edition):	Select One: O pTX O pT0 O pTis O pT1 O pT1a O pT1b O pT2 O pT2a O pT2b O pT3 O pT4		
12. pN: Pathologic spread lymph nodes (AJCC 7th edition):	Select One: O pNX O pN0 O pN1 O pN2 O pN3		
13. M: Distant metastases (AJCC 7th edition):	Select One: O cM0 O cM1 O cM1a O cM1b O pM1 O pM1a O pM1a		
14. Pathologic tumor stage group (AJCC 7th edition):	Select One: O Occult carcinoma O Stage 0 O Stage IA O Stage IB O Stage IIA O Stage IIB O Stage IIB O Stage IIIB O Stage IIIB O Stage IIIB		



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15. Did pathology review of the hematoxylin and eosin slide derived from quality control formalin-fixed paraffin-embedded tumor tissue confirm the histological type to be eligible for BPV study?	Select One: O Yes O No			
16. This slide meets the microscopic analysis criteria of the BPV project of necrosis percentage of <20% AND tumor content of ≥50% tumor nuclei:	Select One: O Yes O No If No is selected, sy criteria of the BPV	_	meet the microscopic analysis	
17. Pathology review comments:				



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pathologist:

performed by:

21. Data entry in the local pathology review form was

### Biospecimen Pre-Analytical Variables (BPV) Lung Local Pathology Review Form

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Concordance With Diagnostic Pathology Report					
18. This slide is consistent with the findings of the diagnostic pathology report for this case:	Select One: O Yes O No If No is selected, spe pathology report:	cify what findings are not	consistent with the diagnostic		
19. Name of local biospecimen					
source site reviewing					
pathologist:					
20. Date of slide review by the					